



Effective on 12/08/04
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**450.00**

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: **50-0463**

Deposit Account Name: **MICROSOFT CORPORATION**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s)
under 37 CFR 1.16 and 1.17

☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | 0 |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | 0 |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|---|----------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

Total Claims 6 - 19 or HP = 0 x 50 = 0
HP = highest number of total claims paid for, if greater than 20
Indep. Claims 2 - 5 or HP = 0 x 200 = 0
HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims
0 Fee (\$)
0 Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets 0 - 100 = 0 / 50 = 0 (round up to a whole) number x 250 = 0
Extra Sheets 0 / 50 = 0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: **Extension of Time Request (2 months)**

Fees Paid (\$)

0

450.00

SUBMITTED BY

| | | | | | |
|-------------------|---------------------------|-----------------------------------|---------------|-----------|-----------------------|
| Signature | | Registration No. (Attorney/Agent) | 45,124 | Telephone | (425) 707-9382 |
| Name (Print/Type) | Steven J. Spellman | | | Date | 9-1-2005 |

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

Docket Number (160325.01)

Application Number 09/759,804

Filed January 12, 2001

For IMPROVED SAMPLING FOR QUERIES

Art Unit 2161

Examiner Filipczyk, Marcin R.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | <u>Fee</u> | <u>Small Entity Fee</u> | |
|--|------------|-------------------------|----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$55 | \$ _____ |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$215 | \$450.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$490 | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$765 | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1040 | \$ _____ |

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account Number 50-0463. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71.
☒ Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
☒ attorney or agent of record. Registration Number 45,124.
☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____

Signature

9/1/2005

Date

Steven J. Spellman

(425) 707-9382

Typed or printed name

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted